

**POST OFFICE
TO ADDRESSEE**

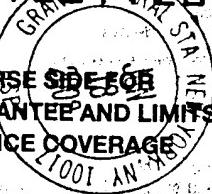


UNITED STATES POSTAL SERVICE™



EL477037728US

EL477037728US



**SEE REVERSE SIDE FOR
SERVICE GUARANTEE AND LIMITS
ON INSURANCE COVERAGE**

Customer Copy
Label 11-F July 1997

ORIGIN (POSTAL USE ONLY)

PO ZIP Code 10017	Day of Delivery <input type="checkbox"/> Next <input checked="" type="checkbox"/> Second	Flat Rate Envelope <input type="checkbox"/>
Date In 6/18/02	<input type="checkbox"/> 12 Noon <input type="checkbox"/> 3 PM	Postage \$ 51.30
Time In 18:47	Military <input type="checkbox"/> 2nd Day <input type="checkbox"/> 3rd Day	Return Receipt Fee <input type="checkbox"/>
Weight .21 lbs	Int'l Alpha Country Code <input type="checkbox"/>	COD Fee <input type="checkbox"/>
No Delivery <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday	Acceptance Clerk Initials LJ	Insurance Fee <input type="checkbox"/>
		Total Postage & Fees \$ 51.30

CUSTOMER USE ONLY

METHOD OF PAYMENT:

Express Mail Corporate Acct. No.

WAIVER OF SIGNATURE (Domestic Only): Additional merchandise insurance is void if waiver of signature is requested. I wish delivery to be made without obtaining signature of addressee or addressee's agent. If delivery employee judges that article can be left in secure location, and I authorize that delivery employee to leave it there, signature is not required. Delivery is to be made by **NO DELIVERY**.

Federal Agency Acct. No. or

Postal Service Acct. No.

FROM: (PLEASE PRINT)

PHONE ()

**PENNIE & EDMONDS LLP
1155 AVENUE OF THE AMERICAS
17TH FL.
NEW YORK NY 10036-2711**

L7853-211

PRESS HARD.

You are making 3 copies.

FOR PICKUP OR TRACKING CALL 1-800-222-1811

www.usps.gov



TO: (PLEASE PRINT)

PHONE ()

**ASSISTANT COMMISSIONER
FOR PATENTS
WASHINGTON DC 20231-9999**

577

**E02
T12**